Secretary of State Office 500 E Capitol Ave Pierre, SD 57501 (605)773-4845

COMMERCIAL REGISTERED AGENT STATEMENT OF TERMINATION

Please Type or Print Clearly in Ink
Please submit one **Original** and one **Photocopy FILING FEE: \$10** Payable to SECRETARY OF STATE

RECEIPT NO		

	ne indicated Commercial Registered Agent (CRA) submits to the Secretary of State the following statement for the irpose of terminating its status as a commercial agent in the State of South Dakota.		
1.	The Commercial Registered Agent CRA#		
2.	The CRA Name		
3.	The agent is no longer in the business of serving as a commercial registered agent in South Dakota. The termination will take effect on the thirty-first day after the day on which this statement is filed by the Secretary of State office.		
4.	. The Commercial Registered Agent shall promptly furnish each entity represented by it with notice in a record of the filing of the Commercial Registered Agent Statement of Termination.		
Tł	ne statement of termination shall be signed by or on behalf of the agent.		
Da	ated		
	(Signature of an authorized officer)		
	(Printed Name)		
	(Title)		